

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA	70891	9700
O.P.E. CLASSIFIER		5	10-2-01
FORMALITY REVIEW	2A	JCS83	10/26/00
RESPONSE FORMALITY REVIEW	MT	593	03/26/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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